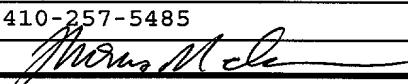
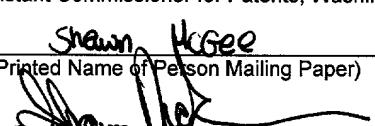
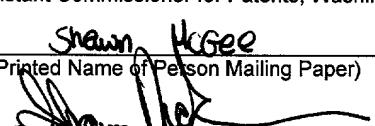
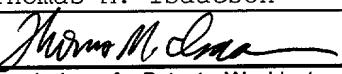


12-22-00

PTO/SB/05 MODIFIED BY AT&T CORP.

UTILITY PATENT APPLICATION TRANSMITTAL <small>Only for new nonprovisional applications under 37 CFR 1.53(b)</small>		Attorney Docket No.	1999-0021	Total Pages		
		First Named Inventor or Application Identifier				
		Roderick Nelson				
		Express Mail Label No.		EL487593518US		
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>			ADDRESS TO:	Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231		
1. <input checked="" type="checkbox"/> Fee Transmittal Form <small>(submit an original, and a duplicate for fee processing)</small> 2. <input checked="" type="checkbox"/> Specification [Total Pages 18] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> - Descriptive title of invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings(if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 3] 4. Oath or Declaration [Total Pages] <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 15 completed)</small> <i>[Note Box 15 below]</i> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 163(d)(2) and 1.33(b)</small> 			5. <input type="checkbox"/> Microfiche Computer Program (Appendix B) 6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies 			
ACCOMPANYING APPLICATION PARTS						
7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 13. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 14. <input type="checkbox"/> Other :						
15. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior Application No: Prior application information: Examiner: Group/Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
16. CORRESPONDENCE ADDRESS						
<input type="checkbox"/> Customer Number or Bar Code Label		(Insert Customer No. or Attach bar code label here)		<input type="checkbox"/> Correspondence address below		
NAME	Samuel H. Dworetzky					
ADDRESS	AT&T CORP. P.O. Box 4110					
CITY	Middletown	STATE	New Jersey	ZIP CODE	07748-4110	
COUNTRY	United States of America					
17. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED						
NAME	Thomas M. Isaacson			Reg. #	44166	
TELEPHONE	410-257-5485					
SIGNATURE				DATE	12/21/00	
"Express Mail" Mailing Label Number EL487593518US			Date of Deposit 12/21/2000			
I hereby certify that this is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington D.C., 20231						
 <small>(Printed Name of Person Mailing Paper)</small>						
 <small>(Signature of Person Mailing Paper)</small>						

FEE TRANSMITTAL <small>Patent Fees are subject to annual revision.</small>		<i>Complete if Known</i>																																																																																																																																															
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<p>1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number 01-2745 Deposit Account Name AT&T CORP.</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing Date of the Notice of Allowance</p>			<p>3. 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SUBMITTED BY			<i>Complete (if applicable)</i>	
Typed or Printed Name	Thomas M. Isaacson			Reg. Number 44166
Signature				Deposit Account User ID

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